

Form **1040**

Department of the Treasury—Internal Revenue Service

(99)

**2021**

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

**Filing Status**

Single  Married filing jointly  Married filing separately (MFS)  Head of household (HOH)  Qualifying widow(er) (QW)

Check only  
one box.

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QW box, enter the child's name if the qualifying person is a child but not your dependent ►

|   |   |   |  |
|---|---|---|--|
| Your first name and middle initial<br><b>Joseph G</b>   | Last name<br><b>Bourne</b>                  | Your social security number<br>[REDACTED]     |  |
| If joint return, spouse's first name and middle initial<br><b>kasey M</b>                                     | Last name<br><b>bourne</b>                  | Spouse's social security number<br>[REDACTED] |  |
| Home address (number and street). If you have a P.O. box, see instructions.<br><b>12249 26F St NW</b>         |   | Apt. no.<br>[REDACTED]                        | Presidential Election Campaign<br>Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.<br><input type="checkbox"/> You <input type="checkbox"/> Spouse |
| City, town, or post office. If you have a foreign address, also complete spaces below.<br><b>Watford City</b> |   | State<br><b>ND</b>                            |  |
| Foreign country name<br>[REDACTED]  | Foreign province/state/county<br>[REDACTED] | ZIP code<br><b>588549624</b>                  |  |
| Foreign postal code<br>[REDACTED]   |   |   |  |

At any time during 2021, did you receive, sell, exchange, or otherwise dispose of any financial interest in any virtual currency?  Yes  No**Standard Deduction** Someone can claim:  You as a dependent  Your spouse as a dependent Spouse itemizes on a separate return or you were a dual-status alienAge/Blindness You:  Were born before January 2, 1957  Are blind Spouse:  Was born before January 2, 1957  Is blind

| Dependents (see instructions):<br>If more than four dependents, see instructions and check here ► <input type="checkbox"/> |                            | (2) Social security number | (3) Relationship to you | (4) <input checked="" type="checkbox"/> If qualifies for (see instructions):<br>Child tax credit | Credit for other dependents |
|--|----------------------------|----------------------------|-------------------------|--|-----------------------------|
| (1) First name<br>[REDACTED]   | Last name<br><b>Bourne</b> | [REDACTED]                 | <b>Son</b>              | <input checked="" type="checkbox"/>  | <input type="checkbox"/>    |
|  |                            |                            |                         | <input type="checkbox"/>   | <input type="checkbox"/>    |
|  |                            |                            |                         | <input type="checkbox"/>   | <input type="checkbox"/>    |
|  |                            |                            |                         | <input type="checkbox"/>   | <input type="checkbox"/>    |
|  |                            |                            |                         | <input type="checkbox"/>   | <input type="checkbox"/>    |

|   |  |                |
|---|--|----------------|
| Attach Sch. B if required.  | 1 Wages, salaries, tips, etc. Attach Form(s) W-2 . . . . . | 1 97,192.      |
|   | 2a Tax-exempt interest . . . . .                           | 2a [REDACTED]  |
| 3a Qualified dividends . . . . .  | 3a [REDACTED]  | 3b [REDACTED]  |
| 4a IRA distributions . . . . .  | 4a [REDACTED]  | 4b [REDACTED]  |
| 5a Pensions and annuities . . . . .   | 5a 17,642.   | 5b 13,671.     |
| 6a Social security benefits . . . . .   | 6a [REDACTED]  | 6b [REDACTED]  |
| 7 Capital gain or (loss). Attach Schedule D if required. If not required, check here ► <input type="checkbox"/> | 7 [REDACTED]   | 7 [REDACTED]   |
| 8 Other income from Schedule 1, line 10 . . . . .   | 8 [REDACTED]   | 8 12,616.      |
| 9 Add lines 1, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your total income . . . . .                                | 9 [REDACTED]   | 9 123,479.     |
| 10 Adjustments to income from Schedule 1, line 26 . . . . .   | 10 [REDACTED]  | 10 [REDACTED]  |
| 11 Subtract line 10 from line 9. This is your adjusted gross income . . . . .                                   | 11 [REDACTED]  | 11 123,479.    |
| 12a Standard deduction or itemized deductions (from Schedule A) . . . . .                                       | 12a 25,100.  | 12b [REDACTED] |
| b Charitable contributions if you take the standard deduction (see instructions)                                | 12c 25,100.  | 12b [REDACTED] |
| c Add lines 12a and 12b . . . . .   | 13 [REDACTED]  | 13 [REDACTED]  |
| 13 Qualified business income deduction from Form 8995 or Form 8995-A . . . . .                                  | 14 25,100.   | 14 [REDACTED]  |
| 14 Add lines 12c and 13 . . . . .   | 15 98,379.   | 15 [REDACTED]  |
| 15 Taxable income. Subtract line 14 from line 11. If zero or less, enter -0- . . . . .                          |  |                |

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

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